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CONFIRMATION NO. 9903

<b>SERIAL NUMBER</b> 10/516,719	<b>FILING OR 371(c) DATE</b> 12/02/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1623	<b>ATTORNEY DOCKET NO.</b> TURCHETTA ET AL 2 PCT	
<b>APPLICANTS</b> Stefano Turchetta, Roma, ITALY; Pietro Massardo, Roma, ITALY; Paolo Casellato, Roma, ITALY;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IB03/02442 06/04/2003					
<b>** FOREIGN APPLICATIONS *****</b> ITALY MI2002A001209 06/04/2002					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>SKK</i> <i>Perd</i> <i>SR</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> ITALY	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 25889					
<b>TITLE</b> Process for preparing high purity azithromycin					
<b>FILING FEE RECEIVED</b> 950	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		